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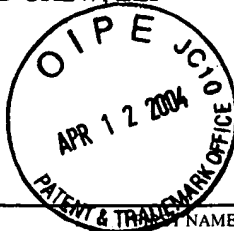
Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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20350 7590 01/26/2004

TOWNSEND AND TOWNSEND AND CREW, LLP
 TWO EMBARCADERO CENTER
 EIGHTH FLOOR
 SAN FRANCISCO, CA 94111-3834



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Landon Clark (Depositor's name)
 Landon Clark (Signature)
 April 6, 2004 (Date)

APPLICATION NO.	FILING DATE	NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/456,042	12/06/1999	ROBERT F. BONNER	15280-347100	5889

TITLE OF INVENTION: DESIGN FOR NON-CONTACT LASER CAPTURE MICRODISSECTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	04/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GABEL, GAILENE	1641	435-040500

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 William Michael Hynes
 2 Townsend and Townsend
 3 and Crew LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

THE GOVERNMENT OF THE UNITED STATES OF AMERICA
 as represented by the Secretary of the Department
 of Health and Human Services

Rockville, Maryland

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☒ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee
☒ Advance Order - # of Copies 12

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

William Michael Hynes 24,168

(Authorized Signature) William Michael Hynes (Date) April 6, 2004

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